

CURSILLOS OF CHRISTIANITY OF THE ARCHDIOCESE OF SAN ANTONIO

3-DAY ENGLISH CURSILLO CANDIDATE REGISTRATION FORM The total cost for the weekend is \$225. (Non-Refundable \$50 deposit)

Please type or PRINT clearly. For items that do not apply write 'N/A'. For assistance completing this form, please refer to your sponsor or contact us at (210) 492-8788 or e-mail CursilloSA@gmail.com

CURSILLO WEE	KEND DATE:	(if known, otherv			-	
Name		Persona	l E-mail			
Address		City/St	ate/Zip			
Birth Date	Age	Occupation		Pl	none	
Your Parish/Church	Parish City					
Gender: Male □ Fen	nale 🗌 Eme	rgency Contact:			_Phone:	
Marital Status: Single	e 🗌 Marrie	ed 🗆 Widowed 🗆 Sep	oarated 🗆 🏻	Divorced 🗆	Annulment \square	
If married, spouse name): 			_		
Has your spouse lived th	ne 3-day Cur	sillo? Yes □ No □ If	so, where?			
Sacraments Received: I	•	Holy Communion (3) Sacrament of the Sic		-	Orders 🗆	
Do you have any health	or dietary re	estrictions? (such as climbi	ng stairs, food a	llergies, etc.)	f yes, please specify:	
Why would you like to a	ttend a Curs	illo weekend?				
Have you ever been on a			o □ If yes, v	what type of	f retreat(s) and where:	
NOTE: All information on thi outside the Cursillo Moveme of organizing and conducting	nt of the Archo	diocese of San Antonio. All c				
Please return this application Pay in full or \$50 non-refunc mail to Cursillo SA, P.O. Box	lable deposit.	Make checks payable to "CC		App Pay option:	Susan Gercia (SAA) radius of Cristanity (SAA) Table of Cristanity (SAA)	
Signature:		Date:				